

08/28/01
J1003 U.S. PTO

JC997 U.S. PTO
09/939769
08/28/01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: James P. Hoeffler et al.

Title: SINGLE CHAIN
MONOCLONAL ANTIBODY
FUSION REAGENTS THAT
REGULATE TRANSCRIPTION
IN VIVO

Prior Appl. No.: 08/728,890

Prior Appl. Filing Date: 10/10/1996

Examiner: Unassigned

Art Unit: Unassigned

CONTINUING PATENT APPLICATION
TRANSMITTAL LETTERCommissioner for Patents
Box PATENT APPLICATION
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is a:

[X] Continuation [] Division [] Continuation-In-Part (CIP)

of the above-identified copending prior application in which no patenting, abandonment, or termination of proceedings has occurred. Priority to the above-identified prior application is hereby claimed under 35 U.S.C. § 120 for this continuing application. The entire disclosure of the above-identified prior application is considered as being part of the disclosure of the accompanying continuing application and is hereby incorporated by reference therein.

Enclosed are:

- [X] Specification, Claim(s), and Abstract (95 pages).
- [X] Declaration and Power of Attorney (2 pages).
- [X] Information Disclosure Statement.
- [X] Form PTO-1449 with 41 listed reference(s).
- [X] Preliminary Amendment.

[X] Revocation of Prior Powers of Attorney by Applicant

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$710.00	\$710.00
Total Claims:	23	- 20	= 3	x \$18.00	= \$54.00
Independents:	7	- 3	= 4	x \$80.00	= \$320.00
If any Multiple Dependent Claim(s) present:				+ \$270.00	= \$0.00
				SUBTOTAL:	= \$1,084.00
[X]	Small Entity Fees Apply (subtract ½ of above):				= \$0.00
	TOTAL FILING FEE:				= \$1,084.00

[X] A check in the amount of \$1,084.00 to cover the filing fee is enclosed.

- [] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

By S. A. Bent

Date August 28, 2001

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